A Family Services Guide

PDA vs ODD

What are the differences?

Supporting autistic children, young people, adults and their families across Barking and Dagenham, Havering and Redbridge

PDA vs ODD: What are the differences?

Persistent (or Pathological) Demand Avoidance (PDA) and Oppositional Defiant Disorder (ODD) can look superficially similar – both involve resisting or refusing everyday requests – but they arise from very different underlying causes and need very different approaches.

What is PDA?

An anxiety-driven profile

PDA is a profile that some autistic people identify with, characterised by an anxiety-driven need to resist and avoid the ordinary demands of everyday life.

Avoidance is not wilful defiance – it is a survival response to an overwhelming sense of loss of control. People with a PDA profile often use social strategies (distraction, negotiation, excuses, or role play) to avoid demands.

> **Diagnostic status**
>
> PDA is not currently a stand-alone diagnosis in the main diagnostic manuals (DSM-5 or ICD-11); it is best understood as a description of a particular pattern of autistic traits, and can only be identified alongside an autism diagnosis or assessment.

What is ODD?

A formally recognised diagnosis

ODD is characterised by a persistent pattern of angry or irritable mood, argumentative or defiant behaviour, and vindictiveness towards authority figures, lasting at least six months.

It is not specifically linked to autism, and is not primarily driven by anxiety in the same way as PDA – though the two can, in some cases, co-occur.

Key differences

Area	PDA	ODD
Diagnostic status	Not a stand-alone diagnosis in DSM-5/ICD-11; a described profile, usually identified alongside autism	Formal diagnosis in DSM-5 and ICD-11
Root cause	Anxiety and a need for autonomy/control	Pattern of anger, irritability, and defiance
Link to autism	Recognised as an autism profile	Separate diagnosis, not autism-specific
Nature of resistance	Avoids demands regardless of who is asking or what is asked	Defiance often targeted at authority figures specifically
Social strategies	Often uses charm, distraction, negotiation, or excuses to avoid demands	Less likely to use social strategies; more direct refusal or confrontation
Response to rewards/sanctions	Typically ineffective, and can increase anxiety and avoidance	Can respond to consistent behavioural strategies and consequences
Consistency	Avoidance can appear even with enjoyable or self-chosen activities	Defiance usually tied to specific demands/rules, not all activities
Best-fit approach	Low-demand, collaborative, flexible, anxiety-reducing approaches	Structured, consistent behavioural approaches with clear boundaries

Why the distinction matters

Getting it right matters

Getting the right understanding and diagnosis is important so that support is not mismatched to the underlying need.

- Approaches that work well for ODD (firm boundaries, consequences, reward charts) can increase anxiety and avoidance in someone with a PDA profile
- Approaches that work well for PDA (choice, flexibility, reduced direct demands) may not address the specific pattern of defiance seen in ODD

Approaches that can help with PDA

Reduce direct demands

Offer genuine choice and control.

Use indirect language

E.g. "I wonder if..." rather than "you need to..."

Build in flexibility and humour

Collaboration rather than confrontation.

Pick your battles

Focus on safety and priorities rather than every demand.

Remember

Neither PDA-driven avoidance nor ODD-related defiance is a choice to be "naughty". Understanding the difference in root cause is the key to choosing an approach that actually helps rather than escalates distress.

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